

Los Angeles County PEI TF-CBT Program Performance Evaluation

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January 19, 2011

Program Performance Evaluation

- Process, materials and support
- Role of program performance evaluation
- Reports



Process and Materials

- Measures provided by DMH or CIMH
- Evaluation guide provided by CIMH
- Pre-formatted (Excel) data base provided by CIMH
- Webinar training on measures and process provided by CIMH
- Practitioners administer and score measures
- Agencies enter data
- Data submitted by agencies twice each year
- Analysis and reporting completed by CIMH
- Aggregate and site specific reports intended for supervisors and practitioners reviewed by agencies



2-Measure Approach

- General (common) measure
 - Completed at the start and end of TF-CBT
 - Youth Outcome Questionnaire © (YOQ)
 - Completed by parent/caregiver
 - Youth Outcome Questionnaire-Self Report ©(YOQ-SR)
 - Completed by youth
- Treatment target (specific) measures
 - Completed at the start and end of TF-CBT
 - Post Traumatic Stress Disorder-Reaction Index © (PTSD-RI)
 - Completed by parent/caregiver and child



What You Should Have to Start

- Guide to Evaluation and All Measures (PDF File)
 - [TFCBT Outcome Evaluation Guide and Forms-3](#)
 - “Quick-Start” instructions for evaluation
 - Measures of symptom-specific and global youth mental health functioning (PTSD-RI and YOQ)
- Database (Excel File)
 - [TFCBT Data Entry Shell2](#)
 - Holds all data for all children served
 - Submit to CIMH twice a year
 - Keep entering new data into same database (ongoing record)



TF-CBT Data Submissions

- Data submissions occur twice a year
 - The end of February (reflecting children served thru January)
 - The end of August (reflecting children served through July)
 - *Note that this is the anticipated schedule; actual data submission dates may vary slightly*
- An email notice is sent approximately one month in advance of each data submission deadline
- After data are submitted, sites continue to enter new data into the same database (always reflects an ongoing, historical record of children served)
- Every effort is made to distribute reports within two months of data submission
 - Aggregate and site-specific reports



Triple P Data Submissions

- Agencies may choose from among the following methods for submitting their Excel databases to CIMH:
 - Use YouSendIt to submit data electronically
 - YouSendIt (www.YouSendIt.com) is a vendor that supports the secure transfer of electronic data (encrypted and password-protected)
 - Mail a password-protected CD to CIMH and submit the password separately (via email or phone)
 - Email an encrypted, password-protected file(s) to CIMH and submit the password separately (via email or phone)



Training and Support

- Webinar
 - Conducted periodically
 - Importance of evaluation
 - Clinical utility of measures
 - Administration and scoring
 - Data entry and submittal
- Recorded webinar
 - Available at www.cimh.org
- Individual assistance
 - Contact Cricket Mitchell, Ph.D.
 - Email: cmitchell@cimh.org
 - Cell phone: 858-220-6355



Clinical Utility & Program Improvement

- Assessment is the beginning of developing a relationship with the child and parents
 - Demonstrates a desire to know what the child is experiencing
 - By incorporating standardized measures of functioning, the efficiency and thoroughness of assessment is enhanced



Clinical Utility & Program Improvement

- Using standardized measures of functioning...
 - Assists in initial clinical impressions
 - Provides valuable information to guide treatment/interventions
 - Assesses sufficiency of treatment delivered
 - Demonstrates treatment-related improvements in child functioning



Program Performance Reports

- Entry rate (% referred who start)
- Completion rates (% who start that finish)
- Average age
- Gender % and Ethnicity %
- Diagnoses %
- Average number of sessions, duration of treatment
- % change on relevant-sensitive measures
- Entry, completion and change by gender, ethnicity and diagnosis



Program Performance Reports

1,285 children

6 county and 20 provider organizations

As of July, 2010

Table 1. TF-CBT Status (N=1,285)	
Entry Rate	Dropout Rate
95.6% n=1228	21.7% n=266



Program Performance Reports

Table 2. Client Demographics – Children Who Entered TF-CBT (n=1,228)										
	Gender		Ethnicity					Primary Axis I Diagnosis		
Age (in years)	Female	Male	African-American	Asian/ Pacific Islander	Caucasian	Hispanic/ Latino	Other	PTSD	Other Anxiety/ Mood/ Adjustment	Other
11.6 n=1213	60.3% n=740	39.7% n=488	19.7% n=242	0.7% n=9	18.5% n=227	56.3% n=691	4.7% n=57	33.4% n=410	46.4% n=570	20.0% n=245



Program Performance Reports

Table 3. Service Delivery Data Š Children Who Completed TF-CBT (n=392)

Average Length of Therapy	Average Number of Sessions
26.3 weeks (± 13.8) n=382	19.0 (± 9.0) n=370



Program Performance Reports

Table 4. Outcome Data[±] Š Children Who Completed TF-CBT (n=392)

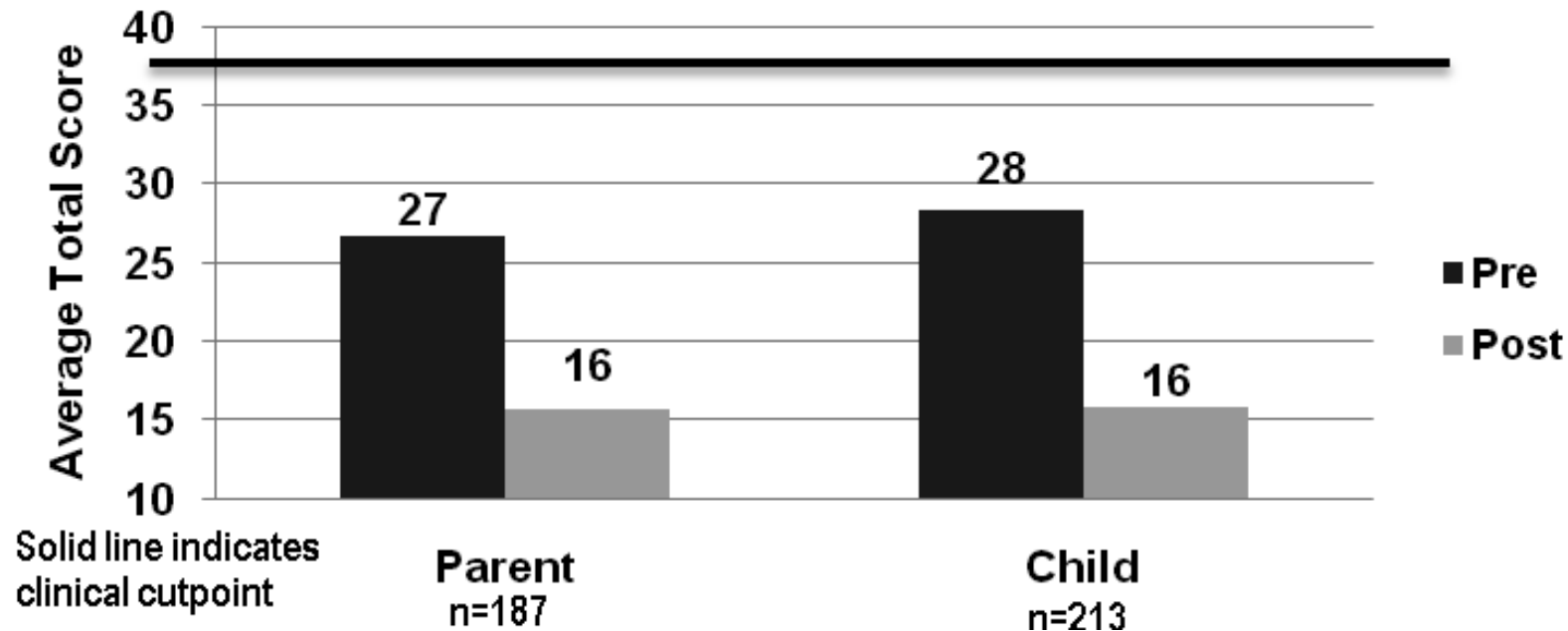
	Percent Improvement From Pre TF-CBT to Post TF-CBT	
	Post-Traumatic Stress Disorder Reaction Index (PTSD-RI) Total PTSD Severity Score	Youth Outcome Questionnaire (YOQ and YOQ-SR) Total Score
Parent/Caregiver	41.5%* n=187 [pre=26.8]	45.4%* n=187 [pre=57.1]
Child/Youth	44.3%* n=213 [pre=28.4]	42.5%* n=173 [pre=55.7]



Program Performance Reports

Post-Traumatic Stress Disorder Reaction Index

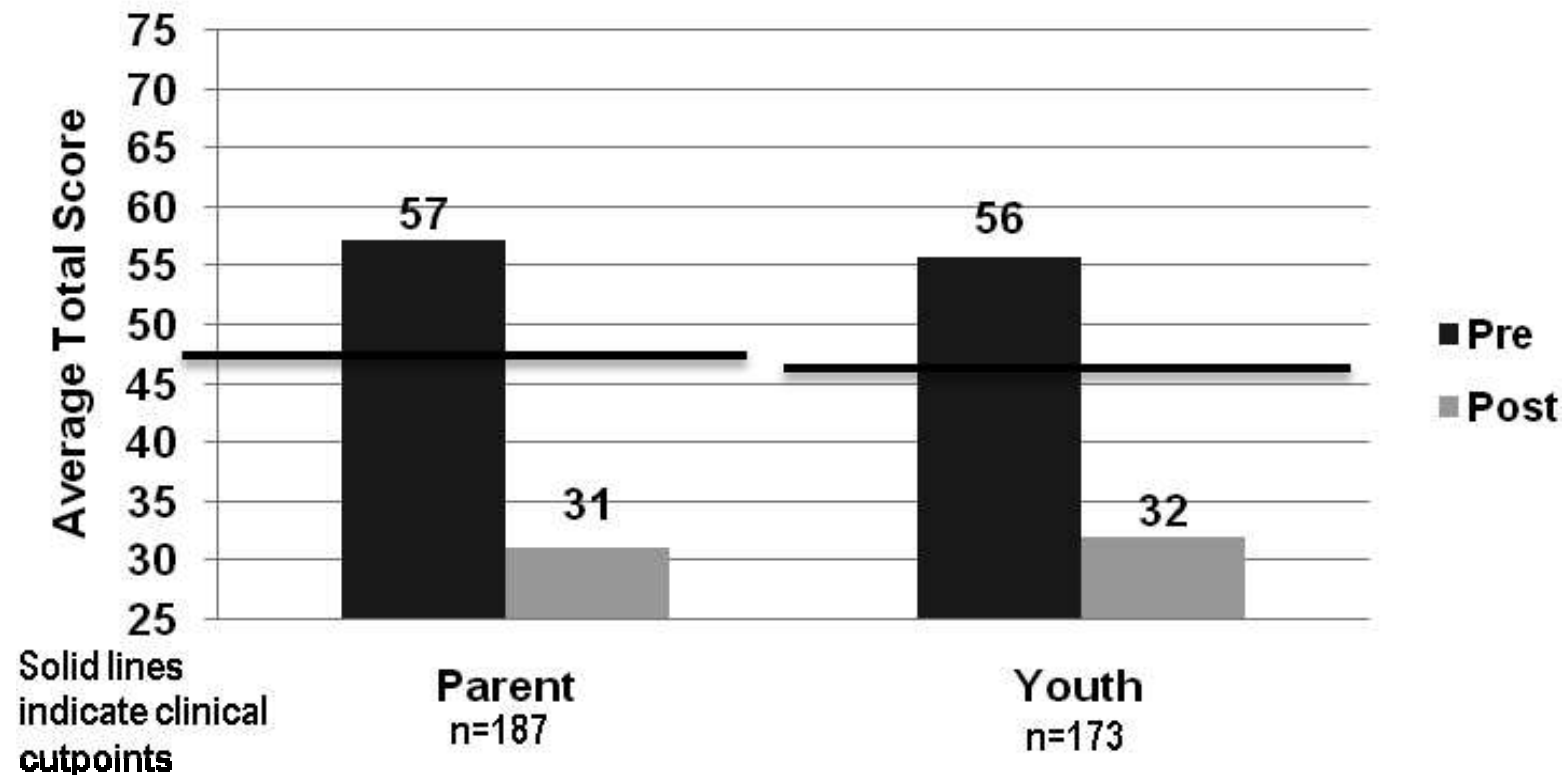
Total PTSD Severity Score
TF-CBT Aggregate Data



Program Performance Reports

Youth Outcome Questionnaires

Total Score - TF-CBT Aggregate Data





Thank you!

